

This Page Is Inserted by IFW Operations
and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

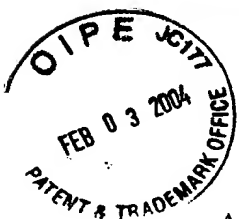
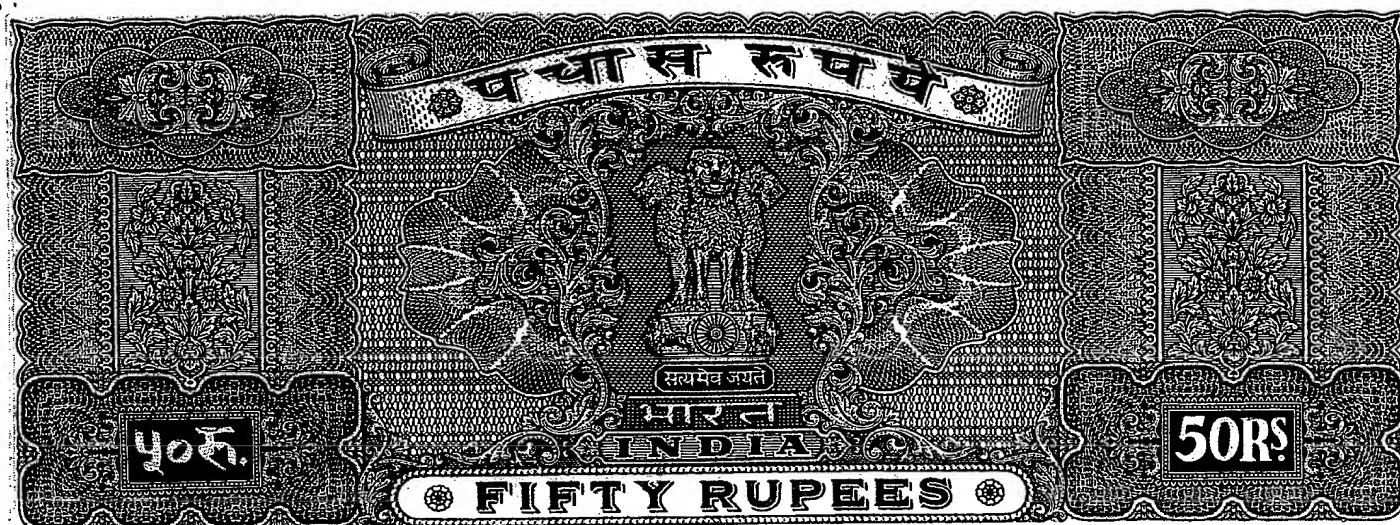
Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

**As rescanning documents *will not* correct images,
please do not report the images to the
Image Problem Mailbox.**

50 Rs.



IN THE U.S. PATENT AND TRADEMARK OFFICE

Applicant : Puranam U. Sarma et al Conf.: 5257
Appl. No. : 09/871,961 Group : 1631
Filed : June 4, 2001 Examiner : L.CLOW
For: NOVEL POLYPEPTIDES USEFUL FOR DIAGNOSIS OF
ASPERGILLUS FUMIGATUS AND A PROCESS OF PREPARING
THE SAME

DECLARATION UNDER 37 C.F.R. 1.132

Assistant Commissioner for Patents
Washington, DC 20231

I, Puranam U Sarma, age 59 yrs, residing at A-126, Inderpuri, New Delhi-110012, a citizen of India, do declare as follows:

1. I am a scientist at Centre for Biochemical Technology, Mall Road, Delhi, India. I graduated in the year 1964 from Osmania University, India. I completed my Master's Degree in Biochemistry from Osmania University at Hyderabad, India, in the year 1966. Subsequently, I was graduated with a doctoral degree in Biochemistry from Osmania University in the year 1974.
2. After completing my doctoral degree, I took up my first assignment as a Scientist with Centre for Biochemical Technology (from Nov 1980 to till date).

P. U. Sarma

I joined the CBT in the year 1980. Currently, I am working as a Senior Scientist with CBT.

Thus, I have been working in the field of immunology for the last 23 years.

3. I am listed as one of the inventors of the subject of the above-identified application, and I have read and understand the application. I am also aware and familiar with all the office actions, objections of the Examiner, and the references cited by the Examiner. Therefore, I am completely and fully aware of all the facts relating to the present patent application.
4. One of the projects undertaken by CBT is "*Novel polypeptide useful for diagnosis of aspergillus fumigatus and a process of preparing the same*". This project was undertaken in the year 1994. The scientists involved in the study were Puranam U Sarma (myself), Taruna Madan, Priyanka Priyadarsiny, Seturam B. Katti, Wahajul Haq. I was one of the main scientists in this study, and I am completely and fully aware of all the facts relating to this project respect of this project. I am also aware and familiar with all the office actions, objections of the Examiner and the references cited by the Examiner. Therefore, I am completely and fully aware of all the facts relating to this project.
5. I now discuss the present invention as the state of the art.

Background and the Present Invention

Aspergillus fumigatus causes a wide spectrum of disorders such as allergic bronchopulmonary aspergillosis. Allergens and antigens of *Aspergillus fumigatus* have been identified by several workers such as Teshima, et al, (1993), Kumar et al, (1993), Moser et al, (1992), Arruda et al, (1992) and Banerjee et al. (1996). However, none of these allergens and antigens has been introduced as diagnostic product in the market.

Therefore, prior to 2001, there was a dearth of diagnostic kits for detection of aspergillosis.

The present invention addresses this scarcity problem. The present invention provides novel peptides of *Aspergillus fumigatus* and also provides an immunodiagnostic ELISA kit based on the antigens.

In particular, the present invention provides epitopic peptides of 18 KD allergen of *Aspergillus fumigatus* strain No. 285 isolated from the sputum of a patient having allergic bronchopulmonary aspergillosis. The strain has been deposited at American Type Culture Collection (ATCC) with Accession No. 42202. Five epitopes were identified on the 18 KD allergens in the immunodominant region from amino acid positions (aa) 6-22, comprising aa 10-20, aa 6-20, aa 14-20, aa 10-22, aa 6-13. The epitopic sequences were synthesized by solid phase method. The present inventors were able to bind *A. fumigatus* specific antibodies in the sera of patients and hence, are useful in enzyme linked immunosorbent assay (ELISA) for the diagnosis of aspergillosis. These peptides exhibited immunogenic properties and hence have potential application in immunotherapy.

State of art

At the time this project was undertaken, i.e. in the year 1994, a person skilled in the art, i.e. a person working in the field of immunology and immunotherapy would be a person holding at least a Master's degree in Bio-Chemistry, Biotechnology, and/or immunology. The person skilled in the art would be familiar with methods relating to the isolation and purification of peptides from a given sample.

When given samples, as such sputum, the person skilled in the art would be in a position to purify and isolate these peptides, especially as directed by the specification of the present application.

Some of these steps involve in the isolation of the peptides are as under:
Identification and sequencing of a major allergen/ antigen, Identification of epitopic regions, Synthesis of epitopic peptides.

ELISA as a general concept was known to a person skilled in the art at the time this project was undertaken, and definitely prior to the date of filing of the present application (i.e., November 3, 1998, the date of the present application No.09/2184,938). ELISA is an assay in which a series of specific antibody-antigen and antibody-antibody interactions are used to bind enzyme molecules (e.g. horseradish peroxidase) to the bottom of a 96-well plate in such a way that the amount of enzyme is directly proportional to the amount of antigen in the system. The amount of enzyme activity is then measured using a color-producing substrate (e.g. ABTs). From this the amount of antigen can be calculated. Therefore, with ELISA, an enzyme conjugated to an antibody reacts with a colorless substrate to generate a colored reaction product.

A number of variations in the ELISA technique have been developed to determine antigen/antibody. The assay used in the present invention is the indirect ELISA. An indirect ELISA is used to detect or quantitate antibodies (or conjugate antibodies. Serum or other samples containing primary antibodies is added to an antigen-coated microtiter well, and allowed to react with the bound antigen. Then, free antibody is washed away. The presence of antibody bound to antigen is detected by adding an enzyme conjugated anti-isotype antibody that binds to the primary antibody. Free secondary antibody is washed away and a substrate for the enzyme is added. The addition of substrate generates a colored reaction product that is measured by specialized spectrophotometric plate readers which can measure the absorbance of the well plate in less than a minute. The amount of binding is directly proportional to the color generated in the end-product.

The ELISA and indirect ELISA methods are generally explained by Janis Kuby in the book titled "IMMUNOLOGY" [Second Edition, W.H. Freeman and Company (1994)].

Before the date of filing of the present application, the general nature of *Aspergillus fumigatus* was known. As mentioned earlier, a few peptides from this fungus have been isolated by just a few workers. However, no reliable diagnostic assay and kits were available in the market for determination and diagnosis of the aspergillosis. It is the invention of the present application that provides such an assay for the first time.

Thus, the level of skill required by a person regarding the present invention is general, and such a person is expected to be aware of and familiar with the methods for purification of peptides and ELISA as a general concept.

Disclosure in the specification

As a skilled person in the art, it is my view that the specification as filed generally teaches how the invention is to be performed. Also, the state of the art is such that no adequate prior methods existed that would give indications that a patient has aspergillosis.

a. "Making" the Present Invention

First, the present specification provides the starting material of the strain from which the peptides are to be isolated (the *Aspergillus fumigatus* strain No. 285). As mentioned, the starting material of this strain has been deposited at the ATCC (Accession No. 42202). The epitopic sequences in the immunodominant region of the 18 KD allergens are to be isolated by a method known in the art, including the solid phase method. Also, the present specification guides one skilled in the art to the structure and nature of the peptides. The sequence of the peptides has been given in the description; the sequence listing of the peptides has also been provided. The epitopes and their sequences have also been given in the present specification. Example 1 describes how the allergen is to be isolated for further tests. Thus, the starting material of the present invention has been adequately described.

Second, the present specification sufficiently guides one skilled in the art to making and using the present invention. Use of the epitopes in diagnostic assay is provided in Examples 2 and 3, wherein these Examples describe the use of the peptides in diagnostic assay for detection of *Aspergillus fumigatus* in patients by comparing with the normal/control. Tables 2 and 3 set out the results of the assay of Examples 2 and 3.

Example 2 demonstrates that the synthetic peptides react with sera of aspergillosis patients. In Example 2, sera of a healthy person as well as a patient having sera of aspergillosis are tested. The method here involved, first, the ELISA plates being coated with the peptides obtained from the *Aspergillus fumigatus* strain No. 285 (the one deposited at ATCC). Second, the un-reacted sites are blocked with bound serum albumin. Thereafter, the sera of patient/control is added to the well and incubated. The plates are washed and anti-human IgG HRP conjugate is added. Subsequently, *Aspergillus fumigatus* substrate is added. With the addition of this substrate, a colored product is formed. The color is red, and spectrophotometric plate readers are used. The color is measured in terms of absorbance values (the amount of binding is directly proportional to the color generated in the end-product). The present specification teaches that the color of the end-product and that of the aspergillosis patients will vary .

b. "Using" the Present Invention

Thus, as can be seen from the disclosure in the present specification, the peptides reacts with the sera of aspergillosis patient and this reaction or binding finally forms a colored product. The formation of the colored product leads to a diagnosis that the person is suffering from aspergillosis.

Although there is no specific level of ELISA absorbance that can be considered as an indicator of aspergillosis in a tested patient, one skilled in the art can determine as to whether or not a patient has aspergillosis based on the present invention. The determination of aspergillosis is determined by the increase in the IgG or IgE level when compared to normal sera. The comparison is based on the immunoglobulin – peptide complex and this serves as an indicator as aspergillosis in a patient.

In other words, the present invention guides one skilled in the art that the levels for IgG binding of the control patient must be compared with that of the aspergillosis

For instance, in referring to Table 2, it is apparent to one skilled in the art that the patient's sera has a significant increase in IgG and IgE levels when compared to the normal sera. As one example, by using peptide 2, the IgG level in a normal is 0.09, whereas the patient with aspergillosis has an IgG level of 0.852. This increase is nearly ten-fold, and is clearly an indication that the patient with the ten-fold increase has aspergillosis. Similarly, in case of peptide 3, the IgG level of a normal is only 0.011 whereas that of patient is 0.674; this increase is more than six times. The same is the case with the peptide Nos. 4, 5 and 6. Flow/valuation in Table 2 shows a four to twenty times increase in IgG and 10 to 1000 times increase in IgE. Therefore, the significant increase in the amount of immunoglobulin – peptide complex that are formed serves as an indicator for aspergillosis in a patient.

With respect to the Table 3 of the present specification, the level of antibodies in immunized mice is far greater than the control mice when the absorbance is read at 490 nm. The level of increase is about 11 times. The same kind of increase in the level of antibodies is seen with peptides 3 to 6 as well.

In view of the above discussion, as a person skilled in the art, I would believe that the specification of the present invention clearly sets out the method for diagnosis of aspergillosis using the peptides of the invention. It is very clear from Tables 2 and 3 in the specification that the levels of IgG and IgE serve as an indicator of aspergillosis. One skilled in the art would be aware how to interpret the readings of ELISA, and there would be no undue burden in performing the present invention as described by the specification.

There is no undue experimentation involved with the present invention, as once the assay is performed as taught by Examples 2 and 3, the results can be easily read by a spectrophotometric plate reader. No further assays are required to determine whether or not a person is suffering from aspergillosis. The claims of the present application even require a reading of the absorbance values. Therefore, the present specification sufficiently guides one skilled in the art to make and use the present invention without experimentation that would be considered as undue.

sufficiently guides one skilled in the art to make and use the present invention without experimentation that would be considered as undue.

6 I hereby declare that all statements made herein of my own knowledge are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the Application or any patent issued thereon.

Date: 2 Sep 2003

By P. Usha Sarma

PURANAM USHA SARMA